



R E C E I V E D

FEB 21 2020

AT 8:30 M
WILLIAM T. WALSH
CLERK

State of New Jersey

DEPARTMENT OF CORRECTIONS
WHITTLESEY ROAD
PO Box 863
TRENTON NJ 08625-0863

PHILIP D. MURPHY
Governor

Shelia Y. Oliver
Lt. Governor

MARCUS O. HICKS, ESQ.
ACTING COMMISSIONER

December 4, 2019

Gerry Caridad SBI 810663D
New Jersey State Prison
P.O. Box 861
Trenton, NJ 08625

Re: OPRA Request – Tracking # 17316

Dear Mr. Caridad:

The Department of Corrections has received your Government Records Request. Your request has been assigned Request ID No. 17316 for tracking purposes. You submitted a request for copies of the following records:

1. Reports related to June 3, 2019 cell extraction
2. Medical Records related to this incident
3. Names, badge number, rank of every officer involved (Vick, [REDACTED], Briggs, [REDACTED], [REDACTED])
4. Nurse Statements
5. Camera footage
6. Pictures of face

In response to item # 1, my office has been provided with 21 pages of records. These records will be redacted prior to release pursuant to NJSA 47:1A-1.1 “emergency or security information or procedures for any buildings or facility which, if disclosed, would jeopardize security of the building or facility or person therein”, NJSA 47:1A-1.1 “security measures and surveillance techniques which, if disclosed, would create a risk to the safety of persons [or] property”, NJAC: 10A:22-2.3(a)(4)any information relating to medical, psychiatric or psychological history, diagnosis, treatment or evaluation, NJAC: 10A:22-2.3(a)(5) a report or record relating to an identified individual which, if disclosed, would jeopardize the safety of any person or the safe and secure operation of the correctional facility or other designated place of confinement, and NJAC 10A:22-2.3(b) an inmate shall not be permitted to inspect, examine, or obtain copies of documents concerning any other inmate.

Records for item # 2 & 4 are exempt from disclosure pursuant to NJAC 10A:22-2.3(a)(4)any information relating to medical, psychiatric or psychological history, diagnosis, treatment or evaluation. *However, you may file form MR-022 with the Medical Department in an attempt to access these records.*

For item # 3, to the extent that you have not identified specific officers, my office cannot determine who was “involved” and therefore this portion of your request cannot be fulfilled pursuant to MAG Entertainment LLC v. Division of Alcohol Beverage Control, 375 N.J. Super. 534 (App. Div. 2005). My office has been provided a 1 page

Gerry Caridad SBI 810663D ~

OPRA 17316

December 4, 2019

Page 2

record for those officers you identified by name. Please note no record was identified for [REDACTED] or [REDACTED]. Also badge numbers would be exempt from disclosure pursuant to NJSA 47:1A-10 Personnel and pension records.

Records for item # 5 are exempt from disclosure pursuant to NJSA 47:1A-1.1 "emergency or security information or procedures for any buildings or facility which, if disclosed, would jeopardize security of the building or facility or person therein", NJSA 47:1A-1.1 "security measures and surveillance techniques which, if disclosed, would create a risk to the safety of persons [or] property", NJAC: 10A:22-2.3(a)(14) Surveillance footage of areas located within a correctional facility's secured perimeter and the precedent set in Gilleran v. Township of Bloomfield 2016 NJ Lexis 1274 (2016).

No records were provided for item # 6.

You have incurred a fee of \$ 1.10 for the available documents. You must complete the enclosed OPRA Records Request Payment Notification and Authorization Form and forward it to the New Jersey State Prison Business Office. Upon submission of the form to the Business Office, the copy fee will be deducted from your inmate account. Once we have been notified of your payment, the documents will be provided to you.

You have a right to challenge the decision by the Department of Corrections. At your option, you may either institute a proceeding in the Superior Court of New Jersey or file a complaint in writing with the Government Records Council (GRC). You may contact the GRC by toll-free telephone at 866-850-0511, by mail at P.O. Box 819, Trenton, NJ 08625, by e-mail at grc@dca.state.nj.us, or at their web site at www.state.nj.us/grc. The Council can also answer other questions about the law.

Sincerely,

John Falyey
Records Custodian

c.: OPRA Records File



State of New Jersey

DEPARTMENT OF CORRECTIONS

WHITTLESEY ROAD

PO Box 863

TRENTON NJ 08625-0863

PHILIP D. MURPHY
Governor

Shelia Y. Oliver
Lt. Governor

MARCUS O. HICKS, Esq.
ACTING COMMISSIONER

November 27, 2019

Gerry Caridad SBI 810663D
New Jersey State Prison
P.O. Box 861
Trenton, NJ 08625

Re: OPRA Request – Tracking # 17316

Dear Mr. Caridad:

The Department of Corrections has received your Government Records Request. Your request has been assigned Request ID No. 17216 for tracking purposes. You submitted a request for copies of the following records:

1. Reports related to June 3, 2019 cell extraction
2. Medical Records related to this incident
3. Names, badge number, rank of every officer involved
4. Nurse Statements
5. Camera footage
6. Pictures of face

My office is still awaiting the results of a search. I will update by December 13, 2019.

Sincerely,

John Falvey
Records Custodian

c.: OPRA Records File



State of New Jersey

DEPARTMENT OF CORRECTIONS

WHITTLESEY ROAD

PO Box 863

TRENTON NJ 08625-0863

PHILIP D. MURPHY

Governor

SHEILA Y. OLIVER

Lt. Governor

MARCUS O. HICKS, ESQ.

Acting Commissioner

December 23, 2019

Gerry Caridad SBI#: 810663D
New Jersey State Prison
P.O. Box 861
Trenton, New Jersey 08625

Re: OPRA Request – Tracking # 17316

Dear Mr. Caridad:

The Department of Corrections has received your payment for the government records identified by Request ID No. 17316. A copy of the record(s) requested is enclosed.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Falvey".

John Falvey
Records Custodian

c.: OPRA Records File

**NJ Department of Corrections
OPRA RECORDS REQUEST
PAYMENT NOTIFICATION
and AUTHORIZATION**



Resident Inmate Request

FOR OFFICE USE ONLY

OPRA Request
Tracking No.:**17316**

Date:

December 4, 2019

PAYMENT NOTIFICATION

In order to process a Records Request, prepayment of all associated costs is required.

Based upon the fee structure indicated at N.J.A.C. 10A:1-1.4, the **copying cost** associated with the Records Request is \$ 1.10

The Records Request will involve **extraordinary costs** to complete in the amount of \$ _____. The extraordinary costs are the result of: _____

**Prepayment of these costs is required prior to the release of the requested records.
If there are not sufficient funds in your account, your request will be denied.**

PAYMENT AUTHORIZATION

To the Business Office: I authorize the deduction of \$ 1.10 from my account to prepay costs associated with this OPRA Records Request.

Inmate Signature: Junk

Date: 12/9/19

Inmate Name: Gerry Caridad, SBI#: 810663D

Inmate Number: Booking # 845599

Location/Wing: NJSP, 3-B-L, North compound
Cell-15

Witness: _____

Forward to the Business Office following OPRA Liaison Approval

BUSINESS OFFICE USE

Note: When processing the deduction from iTAG, please indicate the **OPRA Tracking Number** as a reference.

On December 11, 2019, the Business Office deducted \$ 1.10 from the inmate's account for costs associated with an OPRA Records Request.

Business Office: Enter GL Transaction number generated from iTAG: 22402347

Sufficient funds did not exist in this inmate's account to process the payment. **Request Denied**

Business Office: Forward this form directly to the OPRA Liaison

OPRA LIAISON USE

Attached are the records you requested. This copy of the Payment Notification and Authorization Form shall serve as your receipt.

Sufficient funds did not exist in your account to prepay the costs. **Request Denied**

OPRA Liaison Signature: _____

Date: 12/23/19

1. Officer Vick Eugene (SCPO) Badge # 3043
[REDACTED] [REDACTED]

3. Officer Briggs Rondell (SCPO) Badge # 3487
[REDACTED] [REDACTED]

2. Officer Piszcz, P, Badge # 4573

4. Officer Munoz, E, Badge # 3480

5. Officer Sanjauan, C, Badge # 2478



State of New Jersey
DEPARTMENT OF CORRECTIONS
SPECIAL CUSTODY REPORT

CUS-100
Effective
11-08
Page 1 of 2

NSP

Correctional Facility

To: Majors complex Control #: 19-8289E
 Subject: Tier Extraction
 Date of Incident: 6/3/19 Time of Incident: 1530hrs
 Location: 4 wing 3rd tier
 Staff / Inmate Involved: Ofc F. Vick 3043 / Inmate caridad #810443D
 Describe Incident: On the above date and time
 Officer F. Vick was on the fire man suit up team. I was assigned to the right arm. Under the supervision of Sgt. D. Hamlett the fire man team went to secure inmate caridad #810443D, inmate caridad began to resist and fight back. Inmate caridad #810443D was given multiple orders to comply. Inmate # caridad #810443D was secured. Then inmate caridad #810443D was decontaminated and taken to AGSU medical. Then inmate caridad #810443D was taken to main medical and seen by medical and then taken to infirmary and placed in cell 104.

Print Name: F. Vick

Signature: EKV/M

Print Title: Officer

Badge #: 3043

Date of Report: 6/3/19

Time of Report: 1750

SPECIAL CUSTODY REPORT (Con't)

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Page 2 of 2

Immediate Supervisor's Actions / Comments:

As noted

Print Name: D. Hanley Signature: D. Hanley
Print Title: ST
Date Received: 6/3/19 Time Received: 1800

Shift Commander's Actions / Comment's: (This section is not to be left blank.)

ALTER

Print Name: Mr. Gardner Signature: Mr. Gardner
Print Title: ST
Date Received: 06/03/19 Time Received: 1950

Correction Major Comments: _____

Print Name: _____ Signature: _____
Print Title: _____
Date Received: _____ Time Received: _____



State of New Jersey
DEPARTMENT OF CORRECTIONS
SPECIAL CUSTODY REPORT

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Northern State Prison
Correctional Facility

To: Majors Complex Control #: 19-82890

Subject: Tier Extraction - inmate Caridad #810663D

Date of Incident: 6-3-2019 Time of Incident: 1530

Location: 4 wing

Staff / Inmate Involved: Officer E. Munoz / inmate Caridad #810663D

Describe Incident: On the above date and approximate time I, Officer E. Munoz, was part of a five man suited up team for the tier extraction of inmate Caridad #810663D. I was the number 2 man on the suited up team and was in charge of securing his left arm.

I then assisted with putting cuffs on his left hand. I struck inmate Caridad #810663D in the head and the mid section of his body to gain compliance. The inmate was then escorted from the tier to the shower to get decontaminated. He was then escorted to the ACSU Medical station, where he was evaluated and cleared by medical staff. He was then escorted to Main Medical where he was seen by medical staff. He was cleared and admitted to the infirmary and placed in cell 104. The escort was done under the supervision of Sergeant Hanlett.

Print Name: E. Munoz

Signature:

Print Title: Officer

Badge #: 3480

Date of Report: 6-3-2019

Time of Report: 1910

SPECIAL CUSTODY REPORT (Con't)

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Page 2 of 2

Immediate Supervisor's Actions / Comments: As per M

Print Name: BSL Signature: [Signature]
Print Title: LT
Date Received: 6-3-19 Time Received: 1950

Shift Commander's Actions / Comment's: (This section is not to be left blank.)
PLACED SUB EVIDENCE
LUCIAN

Print Name: LPF/DR Signature: [Signature]
Print Title: LT Time Received: 1950
Date Received: 06/03/19

Correction Major Comments:

Print Name: _____ Signature: _____
Print Title: _____
Date Received: _____ Time Received: _____



State of New Jersey
DEPARTMENT OF CORRECTIONS

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SPECIAL CUSTODY REPORT

NJSO

Correctional Facility

To: Major's Complex

Control #: 19-8289C

Subject: Tier Extraction

Date of Incident: 6/3/2019

Time of Incident: 1530

Location: FW - 3rd Tier

Staff / Inmate Involved: OFC Briggs/Inmate Caridad #810663D

Describe Incident: On the above date and approx. time this officer was part of the five man SOTU team under supervisor of SGT. Hamlett. As number one (1), this officer was responsible for handling the shield and securing inmate Caridad #810663D head. Inmate Caridad was given orders to comply but refused and was sprayed with OC. I struck inmate Caridad with the shield. The remaining members of the extraction team secured inmate Caridad and brought him to the shower for decontamination. He was then escorted to ACSU medical for evaluation, then to main medical and cleared. Inmate Caridad #810663D was then taken to the infirmary, stripped and placed in cell 104, without incident.

Print Name: Briggs

Signature:

Print Title: OFC

Badge #: 3487

Date of Report: 6/3/2019

Time of Report: 1750

SPECIAL CUSTODY REPORT (Con't)

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Immediate Supervisor's Actions / Comments:

As noted

Print Name: D. Hamlett Signature: D. Hamlett
Print Title: Sgt
Date Received: 6/3/19 Time Received: 1830

Shift Commander's Actions / Comment's: (This section is not to be left blank.)

CONFIRMED

Print Name: M. Fawcett Signature: M. Fawcett
Print Title: SGT
Date Received: 06/03/19 Time Received: 1835

Correction Major Comments: _____

Print Name: _____ Signature: _____
Print Title: _____
Date Received: _____ Time Received: _____



State of New Jersey

DEPARTMENT OF CORRECTIONS

SPECIAL CUSTODY REPORT

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NSP

Correctional Facility

To: Major Complex

Control #: 19-8288 G

Subject: ACSU 4 Wing Tier extraction

Date of Incident: 10. 3. 19 Time of Incident: 1530

Location: 4 Wing

Staff / Inmate involved: IIM Caridad # 810663D

Describe Incident: On the above date and time, I OFC. C. Sanjuwan was part of a 5 man suit up team for the extraction of IIM Caridad. My number on the team was 5. I grabbed and twisted his ankle to gain compliance. I then secured the right leg. IIM was escorted from the tier to the 4 wing shower on the 106 level for decontamination. He then was escorted to ACSU medical for evaluation. Once cleared IIM was escorted to main medical. After being cleared he was escorted to the infirmary cell #104 where he was searched and stripped. The extraction was done under the supervision of Sgt Hamlet.

Print Name: C. Sanjuwan

Signature:

Print Title: OPC

Badge #: 2478

Date of Report: 10. 3. 19

Time of Report: 1745

SPECIAL CUSTODY REPORT (Cont)

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Page 2 of 2

Immediate Supervisor's Actions / Comments:

As Noted

Print Name: D. H. Mallett Signature: D. Mallett
Print Title: Sgt
Date Received: 6/3/19 Time Received: 1800

Shift Commander's Actions / Comment's: (This section is not to be left blank.)
Arron

Print Name: M. P. O'Brien Signature: M. P. O'Brien
Print Title: LT
Date Received: 6/3/19 Time Received: 1952

Correction Major Comments:

Print Name: _____ Signature: _____
Print Title: _____
Date Received: _____ Time Received: _____



State of New Jersey
DEPARTMENT OF CORRECTIONS
SPECIAL CUSTODY REPORT

CUS-100
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NSP
Correctional Facility

To: Majors Complex

Control #: 19-8289F

Subject: ACSU 4wing Tier Extraction

Date of Incident: 6-3-19

Time of Incident: 1530

Location: 4wing 3 tier

Staff / Inmate Involved: OFC. P.Pisarz #4573, Inmate Caridad #810663P

Describe Incident: On the above date and time, I OFC. P.Pisarz was part of a 5 man suit up team for the extraction of inmate Caridad #810663P, my number on the team was 4. I strucked inmate Caridad in the left leg to gain compliance. Afterwards, I put the leg irons on his left ankle. Inmate was escorted from the tier to the "4wing shower on the flats for decontamination. Then was escorted to ACSU medical for evaluation, once cleared. Inmate Caridad was escorted to Main Medical. After being cleared in Main Medical, he was escorted to the infirmary cell 104 for placement. All this was done under the supervision of Sgt. Hamlett. End of report.

P.P.

Print Name: P.Pisarz

Signature: M

Print Title: OFC

Badge #: 4573

Date of Report: 6-3-19

Time of Report: 1745

SPECIAL CUSTODY REPORT (Cont')

CUS-100
Effective
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Page 2 of 2

Immediate Supervisor's Actions / Comments:

As noted

Print Name: D. Hamlett Signature: D. Hamlett
Print Title: ST
Date Received: 6/1/19 Time Received: 1800

Shift Commander's Actions / Comment's: (This section is not to be left blank.)

ACD/DR

b122

Print Name: W. Johnson Signature: W. Johnson
Print Title: G
Date Received: Oct 03/18 Time Received: 1950

Correction Major Comments: _____

Print Name: _____ Signature: _____
Print Title: _____
Date Received: _____ Time Received: _____



State of New Jersey
DEPARTMENT OF CORRECTIONS

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SPECIAL CUSTODY REPORT

Northern State Prison
Correctional Facility

To: Major's Complex

Control #: 19-A289A

Subject: Camera Recording of Tier Extraction

Date of Incident: 6/3/19

Time of Incident: 1530

Location: 4 Wing - 3 Tier, ACSU Medical, Main Medical, Infirmary Cell 104

Staff / Inmate Involved: Sgt. C. Underwood 1673, Sgt. Hamlett 1714, Inmate Cardiac 810663D

Describe Incident: On the above date and approximate time, I, Sgt. Underwood video recorded the Tier extraction on 3 Tier of ACSU of, Inmate Cardiac 810663D from 4 wing, to ACSU medical, to Main medical, to Infirmary cell 104, for PHDH placement. The move was supervised by Sgt. Hamlett. The move began with SD Card 19-76. SD card 19-76 appeared to reach its capacity, and was immediately replaced with SD card 19-52, at approximately 1604, with no lapse in camera footage. Flooding and slippery conditions were noted throughout the unit. SD cards 19-76 and 19-52 were secured in the SJD evidence locker. END

Print Name: C. Underwood

Signature:

Print Title: Sgt.

Badge #: 1673

Date of Report: 6/3/19

Time of Report: 1700

SPECIAL CUSTODY REPORT (Cont)

CUS-100
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Immediate Supervisor's Actions / Comments:

Accepted

Print Name: D. Hunter Signature: O. Miller
Print Title: Sgt
Date Received: 6/3/19 Time Received: 1800

Shift Commander's Actions / Comment's: (This section is not to be left blank.)

WITED

thru

Print Name: en Pichon Signature: WP
Print Title: (S)
Date Received: 6/3/19 Time Received: 1800

Correction Major Comments:

Print Name: _____ Signature: _____
Print Title: _____
Date Received: _____ Time Received: _____



State of New Jersey
DEPARTMENT OF CORRECTIONS

CUS-102
Effective 09/15
N.J.A.C:
10A:3-3.7

Page 1 of 2

USE OF FORCE REPORT

Northern State Prison

To: L.F. Croxwell Date of Report: 6/3/19
Shift Supervisor

From: Sgt. J Hamlett
Supervisor/Officer

Inmate Name: Caridad G. Housing Unit: ACSU 4W C/1306

Inmate Number: 8106630 Date of Incident: 6/3/19 Time: 1445 AM

Location: ACSU 4W wing C/1306 to Infirmary Cell 104

TYPE OF FORCE USED: (Check all that apply)

A. Physical Force

B. Mechanical Force

1. Chemical Agents - Type Used: MK-46 OC (Natural Agent)

2. Protective Equipment

a. Shield b. Other: _____

3. Restraint Devices

a. Handcuffs b. Leg Irons c. Waist Chains

d. Other: _____

Use of force, chemical agents, protective equipment, and/or application of restraint devices ordered by:

Name: Sgt. J Hamlett Title: Sgt.

Reason(s) for Use of Force or Mechanical Force:

(Designate as many as apply under the circumstance of the incident.)

1. Subject displaying signs of imminent violence.
2. Subject attempting suicide/suicide precaution.
3. Admission or return to disciplinary housing unit.
4. Subject demonstrating assaultive behavior.
5. Admission of medications.
6. Subject destroying state property.
7. Immediate necessity to prevent injury to subject or to others.
8. Other: _____

The inmate was medically examined by:

Name: Ms. Phillips/Ms. Connelly Title: RN/Br

USE OF FORCE REPORT (Con't)

Signatures of Approving Officers on this page apply to information
on all pages of this form. -- DO NOT SEPARATE PAGES.

CUS-102
Effective 09/15
N.J.A.C.
10A:3-3.7
Page 2 of 2

Total staff members involved (Including Team Member Numbers and Assignments for Cell Extractions)

Name of Staff Member	Title of Staff Member
R. Briggs	Ofc.
E. Munoz	Ofc.
E. Vick	Ofc.
P. Pszcz	Ofc.
C. Sahajan	Ofc.

Explanation of the Incident:

(Be specific and detailed, address questions such as: How was the force used? Who used the force? Who authorized the force? What actions did you take during the incident? What actions of others did you observe? Etc.)

Inmate [redacted] was extracted from 4 wing for blocking sprinklers. He was given C.I. 150, 306, and C. 25K. He is in the infirmary on PHADH Cell 104 Status.

Injury sustained by inmate:

Yes

No

If Yes, specify type of injury and subsequent treatment rendered:
[redacted]

Injury sustained by staff:

Yes

No

If Yes, specify type of injury and subsequent treatment rendered:
[redacted]

Additional Comments / continuation of previous narrative:

Date: 06/03/19

Signature of Shift Supervisor: [Signature]

7/1/20

Report Received by: _____

Date: _____

Action Taken:

Copies to: Correction Major
Special Investigations

Copy of Medical Reports Attached
Copy of Medical Reports Attached

Yes No
 Yes No

[Print Form](#)

[Save As...](#)

[Reset Form](#)

USE OF FORCE REPORT (Con't)

Signatures of Approving Officers on this page apply to information
on all pages of this form. -- DO NOT SEPARATE PAGES.

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Effective 09/15
N.J.A.C.
10A:3-3.7
Page 2 of 3

Total staff members involved (Including Team Member Numbers and Assignments for Cell Extractions)

Name of Staff Member	Title of Staff Member
McGuire, R N1619	SGT.

Explanation of the Incident:

(Be specific and detailed, address questions such as: How was the force used? Who used the force? Who authorized the force? What actions did you take during the incident? What actions of others did you observe? Etc.)

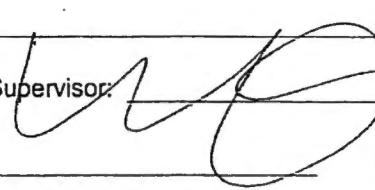
On the above date and time I assisted in the tier extraction of inmate Caridad from ACSU 4 wing 3 tier. I [REDACTED] in [REDACTED]. As the inmate approached the gate I sprayed the MK-46 backing the inmate down the tier. [REDACTED] the suited team and I proceeded forward. At this time the inmate ran at the suited team and I deployed O/C to his center mass. The inmate continued to run toward the suited team until he ran into the officer assigned to be the shield position. The suited team were able to gain compliance, and secure the inmate. He was then escorted to the shower area to be decontaminated before being brought to medical. End of Report

Injury sustained by inmate: Yes No

If Yes, specify type of injury and subsequent treatment rendered:

Injury sustained by staff: Yes No

If Yes, specify type of injury and subsequent treatment rendered:

Additional Comments / continuation of previous narrative:Date: 02/03/19Signature of Shift Supervisor: *Feb 22*

Date: _____

Report Received by: _____

Action Taken:



State of New Jersey
DEPARTMENT OF CORRECTIONS
USE OF FORCE REPORT

CUS-102
 Effective 09/15
 N.J.A.C.
 10A:3-3.7
 Page 1 of 3

Northern State Prison

To: Major's Complex _____ Date of Report: Jun 3, 2019
 Shift Supervisor

From: SGT. McGuire, R N1619 _____
 Supervisor/Officer

Inmate Name: Caridad, Gerry _____ Housing Unit: 4W _____

Inmate Number: 810663D _____ Date of Incident: Jun 3, 2019 Time: 1533 PM

Location: 4W 3 Tier

TYPE OF FORCE USED: (Check all that apply)

A. Physical Force
 B. Mechanical Force

1. Chemical Agents - Type Used: Natural agent _____
2. Protective Equipment
 - a. Shield b. Other: _____
3. Restraint Devices
 - a. Handcuffs b. Leg Irons c. Waist Chains
 - d. Other: _____

Use of force, chemical agents, protective equipment, and/or application of restraint devices ordered by:

Name: McGuire, R. N1619 _____ Title: SGT

Reason(s) for Use of Force or Mechanical Force:

(Designate as many as apply under the circumstance of the incident.)

1. Subject displaying signs of imminent violence.
2. Subject attempting suicide/suicide precaution.
3. Admission or return to disciplinary housing unit.
4. Subject demonstrating assaultive behavior.
5. Admission of medications.
6. Subject destroying state property.
7. Immediate necessity to prevent injury to subject or to others.
8. Other: _____

The inmate was medically examined by:

Name: Patrick _____ Title: RN

SPECI CUSTODY REPORT (Con't)

Signatures of Approving Officers on this page apply to information
on all pages of this form. DO NOT SEPARATE PAGES.

CUS-100

Effective

11-2008

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Correction Major Comments: _____

Name: _____

Signature: _____

Date Received: _____

Time Received: _____



State of New Jersey
Department of Corrections

Inmate Management
 PRELIMINARY INCIDENT REPORT

OIRPINCR

CUS-101
Effective

11/2008

19-8289

Page: 1 of 2

To:	ADMINISTRATOR	Control#:	902690
From:	DWAYNE HAMLETT, CPSGT	Incident Date:	06/03/2019
Report Dated:	06/03/2019 19:16:06	Incident Time:	14:45:00
Type of Incident:	CELL EXTRACTION	Incident Location:	CURA ACSU 4 WING

Inmates Involved:

Inmate Name	INM#	Location
CARIDAD, GERRY	845599	NSP-NORTH-SU-223

Staff Involved:

Staff Name
ROBERTO VILLAREAL, CPO
DWAYNE HAMLETT, CPSGT
EUGENE VICK, SCPO

A Brief Statement of Fact:

On the above date and time, I was notified by Ofc. Villareal N-7552 that Inmate Caridad Gerry 810663D was on ACSU 4 Wing 3rd tier popping fire sprinklers and flooding the tier. Inmate Caridad was given several chances to cuff up but he stated that he wasn't cuffing up. I notified Lt. Sobun and was told that a suit up team would be needed to extract Inmate Caridad off the tier. My suit up team consisted of the following officers: Ofc. R. Briggs N3487 (Shield Man), Ofc. E. Munoz N3480 (#2 Right Arm/Handcuffs). Ofc. E. Vick (#3 Left Arm), Ofc. P. Piszcza (#4 Right Leg/Leg Iron), and Ofc. C. Sanjuan N7478 (#5 Left Leg). Sgt. C. Underwood N1673 was assigned to the camera and Sgt. McGuire was responsible for the use of the MK-46. We reported to 4 Wing and proceeded to the 3rd tier. I ordered Inmate Caridad to come to the fence and cuff up. Inmate Caridad refused and proceeded to approach the gate. Sgt. McGuire sprayed Inmate Caridad with the MK-46.

I ordered the team to extract him from the tier. Inmate Caridad was taken to the ground and secured after a brief scuffle. Once secured, Inmate Caridad was taken to the shower for decontamination and moved to ACSU Medical. RN Mullings treated Inmate Caridad and reported that he sustained [REDACTED]

[REDACTED]. Upon completion, Inmate Caridad was escorted to Main Medical via camera move. Upon arrival, Inmate Caridad was treated by RN Patrick and Dr. Connolly. Inmate Caridad was moved to the firmary and placed in cell 104 without incident. Inmate Caridad was charged with *.150 (Tampering with fire equipment), *.306 (Conduct which disrupts), .256 (Refusing an order) and was placed on PHDH Status. End of Report



State of New Jersey

Department of Corrections

Inmate Management

PRELIMINARY INCIDENT REPORT

OIRPINCR

CUS-101
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11-2008

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To:	ADMINISTRATOR	Control#:	902690
From:	DWAYNE HAMLETT, CPSGT	Incident Date:	06/03/2019
Report Dated:	06/03/2019 19:16:06	Incident Time:	14:45:00
Type of Incident:	CELL EXTRACTION	Incident Location:	CURA ACSU 4 WING

Related Special Report:

SD Cards #19-78 and #19-52

Action Taken by Primary Supervisor:

Staff Name: *D. Hamlett*

Staff Signature: *2/16/19*

Date: *6/3/19*



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[Signature]

Northern State Prison

To: (Name & Rank) Major's Complex Control #: 19-82893

Subject: IM Caridad, Gerry #810663D Tier Extraction

Date of Incident: Jun 3, 2019 Time of Incident: 1530 PM

Location: 4 WING

Staff / Inmate Involved:

SGT McGuire, R. N1619

Describe the Incident:

On the above date and time I assisted in the tier extraction of inmate Caridad from ACSU 4 wing 3 tier. [REDACTED] [REDACTED] [REDACTED] As the inmate approached the gate I sprayed the MK-46 backing the inmate down the tier. [REDACTED] [REDACTED] [REDACTED] the suited team and I proceeded forward. At this time the inmate ran at the suited team and I deployed O/C to his center mass. The inmate continued to run toward the suited team until he ran into the officer assigned to be the shield position. The suited team were able to gain compliance, and secure the inmate. He was then escorted to the shower area to be decontaminated before being brought to medical.

End of Report

Name: McGuire, R. Signature: M

Title: SGT Badge #: N1619

Date of Report: 06/03/19 Time of Report: 1750 PM

Immediate Supervisor's Actions / Comments:

[REDACTED]

Name: Sobun, B. N1391 Signature: _____

Title: LT

Date Received: Jun 3, 2019 Time Received: _____

Shift Commander's Actions / Comments: (This section is not to be left blank.)

MASTER

6/12/20

Name: Crowell, F. N1227 Signature: VK

Title: LT

Date Received: Jun 3, 2019 Time Received: 1950



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Northern State Prison

To: (Name & Rank) Major's Complex

Control #: 19-8281

Subject: I/M Caridad, Gerry #810663D

Date of Incident: Jun 3, 2019 Time of Incident: 1800 PM

Location: Infirmary 104

Staff / Inmate Involved:

Sgt. Comitini N1981

Describe the Incident:

On the above date and time, I recorded the medical assessment on I/M Caridad, Gerry #810663D conducted by Dr. Connolly ; A 2 man suit up team which consisted of Officer DiMichelle N3499 and Officer Wade N4618 under the supervision of Sgt. Falcon was present during the assessment. SD card #317 was used.

Name: Comitini

Signature: C. Comitini

Title: Sgt.

Badge #: N1981

Date of Report: Jun 3, 2019

Time of Report: 1835 PM

Immediate Supervisor's Actions / Comments: Reverend..

Name: J. Reardon

Signature: 1398

Title: Lt.

Date Received: Jun 3, 2019

Time Received: 1840

Shift Commander's Actions / Comments: (This section is not to be left blank.)

Placed Sir evidence locker

B123

Name: F.Crowell

Signature: WJ

Title: Lt.

Date Received: Jun 3, 2019

Time Received: 1950

Correction Major Comments: _____

Name: _____

Signature: _____

Date Received: _____

Time Received: _____